



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



CONFIRMATION NO. 8820

Bib Data Sheet

SERIAL NUMBER 10/698,963	FILING OR 371(c) DATE 10/31/2003 RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. 49321-103
-----------------------------	--	--------------	------------------------	-------------------------------------

## APPLICANTS

Kathryn Chung, Lake Oswego, OR;  
 Steven Johnson, Portland, OR;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/422,930 11/01/2002

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 01/29/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 0	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and  
Acknowledged

*[Signature]* Examiners signature *[Initials]* Initials

ADDRESS  
22504

## TITLE

Treatment of hyperkinetic movement disorder with donepezil

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-------------------------------	---	---